

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

of Massachusetts File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 11 209 Ending Date: 12 208
Type of Report: (Check one) 8th day preceding preliminary th day preceding election 30 day after election year-end report of dissolution
Candidate Full Name (if applicable) Town of Randolph District Office Sought and District So South Mainst. Puncloff Ma 0334 Residential Address Natacha Curgur CFE Committee Name Town of Committee Name Town of Randolph Ma 0334 Residential Address Committee Mailing Address
Telephone Number (optional): Telephone Number (optional):
SUMMARY BALANCE INFORMATION:
Line 1: Ending Balance from previous report Line 2: Total receipts this period (page 3, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 5, line 14) Line 5: Ending Balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 6) Line 7: Total (all) outstanding liabilities (page 7) Line 8: Name of bank(s) used:
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury: (Treasurer's signature) Date: Date: Date: Totrify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period. Candidate without Committee OR Candidate with Independent activity filing separate report I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of periury: Occardidate's signature) Date:
Signed under the penalties of perjury:(Candidate's signature) Date:

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	Natasha Clerger					
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	Income & Expense			SCHED	DLE A	
	As of 10/30/2019					
	-					
	Actuals 2019	Budget	Variance			
INCORAT	Actuals 2019	buuget	Variance			
INCOME Eundraisors	62 10E 00	63,000,00	Ć10F.00			
Fundraisers Other Departies	\$3,185.00	·	\$185.00			
Other Donations	\$7,000.00 \$0.00	1	\$3,000.00 \$0.00			
Loans Previous Ending	1,000		\$0.00			
Dalana						
TOTAL INCOME	\$11,185.00	\$7,000.00	\$4,185.00			
EXPENSES			## # 1 1 1 1 1 1 1 1 1			
Distributions	\$750.00	\$200.00	\$550.00			
		•				
Yard Signs	\$1,500.00	\$1,500.00	\$0.00			
Palm Cards Printing	\$540.00	\$200.00	\$340.00			
Food	\$5,000.00	\$5,000.00			**************************************	
Marketing	\$1,700.00	\$500.00	\$1,200.00			
Banners	\$0.00	\$600.00	(\$600.00)			
Photography	\$0.00	\$155.00	(\$155.00)			
Printing and Postage	\$0.00	\$3,500.00	(\$3,500.00)			
	\$450.00	\$500.00				
T-shirts						
TOTAL EXPENSES	\$9,190.00		\$9,190.00			
REMAINING BALANG	\$1,995.00	\$7,000.00	\$0.00			
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	Schedule A: Receipts			
ate	Last, first Name	Address	Contribution amount	Occupation & Employer
8/28/2017	Planet Konpas	20 Tucker Ter. Randolph, Ma 02368		Radio station based in Randolph
10/1/2017	Clerger, Natacha	580 South Main st. Randoph, Ma 02368	\$ 7,000.00	Owner of Full Color Events
		123 Richmond St. Dorchester, Ma 02124	\$ 400.00	Member of Massachusettes Senate
10/3/2019	Durandisse, Marie	PO Box 366036, Hyde Parker, Ma 02136	\$ 100.00	Heathcare Worker
10/03/2019	Pierre, Marie	11 Alice Rd. Randolph, MA 02368	\$ 250.00	Self Employed
10/3/2019	Louizia, Frantz	49 Boylston St. Randolph, MA 02368	\$ 300.00	Real estate
10/04/2019	Pierre, Adius	69 Oakdale Street Brockton, MA 02301	\$ 50.00	Law enforcement
10/10/2019	Etienne, Edna	64 Elm St. Canton, Ma 02021	\$ 300.00	Owner of Le Foyer Bakery
10/29/2019	Collins, Nick	P.O Box South Boston, Ma 02127	\$ 100.00	State Rep
11/03/2019	Zephir, Pierre	93 Pond Lane, Randolph,MA 02368	\$ 200.00	Founder of GBCC
11/3/2019	Guillaume, Smith	PO Box 95, Dorchester, Ma 02121	\$ 100.00	
11/03/2019	Edmorin, Luc	26 Fessendon St. #3 Mattapan ,Ma 02126	\$ 60.00	
10/20/2019	CTE Nick Collins	P.O Box E- 51 South Boston, Ma 02127	\$ 100.00	
	Neighborhood Treatment Center	1141 Washington St. Boston, Ma 02124	\$ 200.00	
		Total Receipts in Period	23	
		Total Receipts with over \$50 (or listed above)	14	
		Total Receipts \$50 and under* (not listed above	9	
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SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value	
		L			
	NA				
		Line 15: In-Kind Contribution	s over \$50 (or listed above)		
		Line 16: In-Kind Contributions \$50 & under (not listed above)			
Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS					

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
	MA			